

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION**

In re:  
MICHELLE WILLIAMS  
Debtor(s)

Case No. 09-00271

**CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT**

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 01/07/2009.
- 2) The plan was confirmed on 07/20/2009.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on 01/10/2011.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on 10/05/2010.
- 5) The case was completed on 10/30/2012.
- 6) Number of months from filing to last payment: 46.
- 7) Number of months case was pending: 56.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: \$41,828.00.
- 10) Amount of unsecured claims discharged without payment: \$86,850.25.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

**Receipts:**

Total paid by or on behalf of the debtor	\$23,184.00
Less amount refunded to debtor	\$0.00

**NET RECEIPTS:**

**\$23,184.00**

**Expenses of Administration:**

Attorney's Fees Paid Through the Plan	\$3,371.50
Court Costs	\$0.00
Trustee Expenses & Compensation	\$1,313.41
Other	\$0.00

**TOTAL EXPENSES OF ADMINISTRATION:**

**\$4,684.91**

Attorney fees paid and disclosed by debtor:	\$128.50
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**Scheduled Creditors:**

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
ARROW FINANCIAL SERV	Unsecured	443.00	405.09	NA	0.00	0.00
ASSET ACCEPTANCE LLC	Unsecured	2,365.00	2,549.89	NA	0.00	0.00
BLACK EXPRESSIONS BOOK CLUB	Unsecured	74.00	NA	NA	0.00	0.00
CAPITAL ONE	Unsecured	71.00	NA	NA	0.00	0.00
CHICAGO IMAGING	Unsecured	28.85	NA	NA	0.00	0.00
CITIBANK/SEARS	Unsecured	438.00	NA	NA	0.00	0.00
CITY OF CHICAGO DEPT OF REVENU	Unsecured	NA	1,870.00	1,870.00	766.42	0.00
CITY OF CHICAGO PARKING BUREAU	Unsecured	860.00	NA	NA	0.00	0.00
COMED	Unsecured	810.45	NA	NA	0.00	0.00
COMMONWEALTH EDISON	Unsecured	920.00	NA	NA	0.00	0.00
CRANDON EMERGENCY PHYSICIAN	Unsecured	33.00	NA	NA	0.00	0.00
DEPENDICARE	Unsecured	1,206.00	NA	NA	0.00	0.00
ECAST SETTLEMENT CORP	Unsecured	390.00	396.22	396.22	162.39	0.00
ECAST SETTLEMENT CORP	Unsecured	586.00	586.28	NA	0.00	0.00
ECAST SETTLEMENT CORP	Unsecured	NA	518.69	518.69	212.59	0.00
ECMC	Unsecured	51,003.00	53,509.17	41,616.80	9,659.26	0.00
FIRST PREMIER BANK	Unsecured	480.00	NA	NA	0.00	0.00
ILLINOIS DEPT OF HUMAN SERVICE	Unsecured	865.63	815.63	815.63	334.29	0.00
ILLINOIS HEART & VASCULAR	Unsecured	1,242.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY MED CTR	Unsecured	20.98	NA	NA	0.00	0.00
LOYOLA UNIVERSITY PHYS FOUND	Unsecured	316.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY PHYS FOUND	Unsecured	169.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY PHYS FOUND	Unsecured	59.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY PHYS FOUND	Unsecured	59.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY PHYSICIANS	Unsecured	1,600.00	NA	NA	0.00	0.00
MORTGAGE ELECTRONIC REGISTRA	Unsecured	29,396.00	NA	NA	0.00	0.00
MORTGAGE ELECTRONIC REGISTRA	Secured	133,633.00	139,020.79	NA	0.00	0.00
MORTGAGE ELECTRONIC REGISTRA	Secured	NA	24,990.84	2,474.28	2,474.28	0.00
PAYDAY LOAN STORE OF IL INC	Unsecured	252.69	NA	NA	0.00	0.00
PAYDAY LOAN STORE OF IL INC	Unsecured	300.00	NA	NA	0.00	0.00
PEOPLES GAS LIGHT & COKE CO	Unsecured	1,002.00	1,642.94	1,642.94	673.28	0.00

**Scheduled Creditors:**

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
PRA RECEIVABLES MANAGEMENT	Unsecured	480.00	480.14	NA	0.00	0.00
RESURRECTION HEALTH CARE	Unsecured	56.31	NA	NA	0.00	0.00
ROUNDUP FUNDING LLC	Unsecured	121.00	151.10	151.10	61.93	0.00
SBC ILLINOIS	Unsecured	777.00	NA	NA	0.00	0.00
SOUTH SHORE EMERG PHYSICIANS	Unsecured	442.00	NA	NA	0.00	0.00
SOUTH SHORE HOSPITAL	Unsecured	912.00	NA	NA	0.00	0.00
SOUTH SHORE HOSPITAL	Unsecured	82.00	NA	NA	0.00	0.00
SOUTH SHORE RADIOLOGY	Unsecured	120.00	NA	NA	0.00	0.00
SOUTHEAST ANESTHESIA CONSULT	Unsecured	35.15	NA	NA	0.00	0.00
ST JOSEPH HOSPITAL	Unsecured	1,000.00	NA	NA	0.00	0.00
STEWART R MANN	Unsecured	7.98	NA	NA	0.00	0.00
US DEPT OF EDUCATION	Unsecured	NA	10,137.00	10,137.00	4,154.65	0.00
WEISS MEMORIAL HOSPITAL	Unsecured	49.00	NA	NA	0.00	0.00
WINDY CITY EMERG PHY	Unsecured	35.27	NA	NA	0.00	0.00

**Summary of Disbursements to Creditors:**

	Claim Allowed	Principal Paid	Interest Paid
<b>Secured Payments:</b>			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$2,474.28	\$2,474.28	\$0.00
Debt Secured by Vehicle	\$0.00	\$0.00	\$0.00
All Other Secured	\$0.00	\$0.00	\$0.00
<b>TOTAL SECURED:</b>	<b>\$2,474.28</b>	<b>\$2,474.28</b>	<b>\$0.00</b>
<b>Priority Unsecured Payments:</b>			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$0.00	\$0.00	\$0.00
<b>TOTAL PRIORITY:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>GENERAL UNSECURED PAYMENTS:</b>	<b>\$57,148.38</b>	<b>\$16,024.81</b>	<b>\$0.00</b>

**Disbursements:**

Expenses of Administration	<u>\$4,684.91</u>
Disbursements to Creditors	<u>\$18,499.09</u>
<b>TOTAL DISBURSEMENTS :</b>	<b><u>\$23,184.00</u></b>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 09/04/2013

By: /s/ Tom Vaughn

Trustee

**STATEMENT:** This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.